PROJECTED BUDGET

_____

(Name of Organization)

_____

(Name of Event, Program or Project)

Sources of Income	Amount
(list separately and include ticket sales, user fees, donations, fundraising, grants, etc.)	
	$
Total Income:	$

Expenditures	Amount
(list separately and include permit fees, printing, service fees, etc.)	
	$
Total Expenditures:	$
Surplus/Deficit	